

**UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF OHIO
WESTERN DIVISION**

UNITED STATES OF AMERICA,

Case No. 3:22-CR-274

Plaintiff,

JUDGE KNEPP

-vs-

AMANDA HOVANEC,

Defendant.

**MOTION TO WITHDRAW AS
COUNSEL OF RECORD AND
APPOINTMENT OF APPELLATE
COUNSEL**

David Klucas (0041188)
1900 Monroe Street
Toledo, Ohio 43604
PH: (419) 255-1102
FX: (419) 255-1415
Email: Davek@buckeye-access.com

Kenneth Bailey (0090042)
Bailey Legal Group, LLC
220 West Market Street
Sandusky, Ohio 44870
PH: (419) 625-6740
FX: (419) 625-2021
Email: ken@bailey.pro
Attorneys for Defendant Amanda Hovanec

Now come Attorneys Kenneth Bailey and David Klucas, who respectfully requests an Order from this Court permitting them to withdraw as counsel of record for Amanda Hovanec and appointing counsel for her appeal. As grounds for this motion, Attorneys Bailey and Klucas say:

1. They began representing Amanda in May of 2022. Their representation of her spans almost two and a half years. Both Attorneys Bailey and Klucas believe Ms. Hovanec would benefit from a fresh set of eyes.

2. Ms. Hovanec attends to appeal her sentence. The sentencing hearing was a little over six hours and was analogous enough to a trial proceeding that new counsel should be examining the record for potential errors.

3. Until appellate counsel is appointed, Attorneys Bailey and Klucas will take all steps necessary to protect her right to appeal, including filing a timely notice of appeal on 14 October 2024, if a notice was not already filed by new counsel.

4. Attorney Klucas spoke with Ms. Hovanec on 6 October 2024 and informed her that both of her attorneys intended to withdraw and why. Ms. Hovanec understood the reasons Attorneys Bailey and Klucas were requesting to withdraw and agreed that it was in her best interest to obtain new counsel to pursue her appeal.

5. Although Attorneys Bailey and Klucas were retained, the money came from Ms. Hovanec's family members. Ms. Hovanec is indigent and requests the Court to appoint her counsel for her appeal. A CJA23 Financial Affidavit is attached.

Respectfully Submitted,

/s/ Kenneth Bailey
Kenneth Bailey

/s/ David Klucas
David Klucas
Attorneys for Defendant Amanda Hovanec

Certification

This shall certify that a copy of the forgoing was sent this 10th day of October, 2024 to all counsel of record via the Court's Electronic Notification and Filing System.

/s/ David Klucas
David Klucas

CJA 23
(Rev. 11/11)**FINANCIAL AFFIDAVIT**

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT, OR OTHER SERVICES WITHOUT PAYMENT OF FEE

IN THE UNITED STATES DISTRICT COURT COURT OF APPEALS OTHER (Specify below)

IN THE CASE OF

U.S.A. v. Amber Horanec FOR Northwest District of Ohio
AT Toledo, Ohio

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

Amber Horanec

- 1 Defendant - Adult
 2 Defendant - Juvenile
 3 Appellant
 4 Probation Violator
 5 Supervised Release Violator
 6 Habeas Petitioner
 7 2255 Petitioner
 8 Material Witness
 9 Other (Specify) _____

DOCKET NUMBERS
Magistrate Judge
District Court
<u>3:22cr274</u>
Court of Appeals

CHARGE/OFFENSE (describe if applicable & check box →)

Conspiracy to Import A Controlled Substance Resulting in Death or Serious Bodily Harm

 Felony Misdemeanor**ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY**

EMPLOY- MENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Self-Employed				
	Name and address of employer: _____				
	IF YES, how much do you earn per month? \$ _____	IF NO, give month and year of last employment? _____ How much did you earn per month? \$ _____			
	If married, is your spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No				
IF YES, how much does your spouse earn per month? \$ _____	If you are a minor under age 21, what is the approximate monthly income of your parent(s) or guardian(s)? \$ _____				
INCOME & ASSETS	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
	OTHER INCOME	RECEIVED	SOURCES		
	IF YES, give the amount \$ _____ received and identify the \$ _____ sources \$ _____	_____			
CASH	Do you have any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, total amount? \$ _____				
PROP- ERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
	IF YES, give value and description for each \$ _____ \$ _____ \$ _____	VALUE	DESCRIPTION		
OBLIGATIONS & DEBTS	DEPENDENTS	MARITAL STATUS Single Married Widowed Separated or Divorced	Total No. of Dependents	List persons you actually support and your relationship to them	
	DEBTS & MONTHLY BILLS (rent, utilities, loans, charge accounts, etc.)	N/A	DESCRIPTION	TOTAL DEBT	MONTHLY PAYMENT
			\$ 0	\$ 0	

I certify under penalty of perjury that the foregoing is true and correct.

Amber Horanec
SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

10-6-24

Date